



**Applicant Type:** Connected Care Pilot Program

### Application Name

CCPP20200000373 : Phoebe Physicians Group Inc - PPC of Buena Vista

### Application Information

**Submitted Date:** 12/07/2020

**Filing Site Name:** Phoebe Physicians Group Inc - PPC of Buena Vista

**HCP Number:** 70466

**Submitted By:** Ross Youngdale

**CCPP Program Manager:** RoGilbert@phoebehealth.com

### Lead Site Contacts

Permission	First Name	Last Name	Title/Position	Address	City	State	Zip Code	Email	Connected Care Project Manager
Draft	Roderick	Gilbert		417 W 3rd Ave.	Albany	GA	31701	RoGilbert@phoebehealth.com	Yes
Primary	Ross	Youngdale	IT Director	417 3rd St	Albany	GA	31701	ryoungda@phoebehealth.com	No
Tertiary	Dotty	Pendygraft	Operations Assistant	P.O. Box 326	Prospect	KY	40059	dpendygraft@uasave.com	No
Tertiary	Angela	Bowen	Analyst	P O Box 326	Prospect	KY	40059	abowen@uasave.com	No
Tertiary	Aubrey	Ward	Data Entry	PO Box 326	Prospect	KY	40059	aubreyw@uasave.com	No
Tertiary	Elizabeth	Boggs-Goodknight	COO	PO Box 326	Prospect	KY	40059	egoodknight@uasave.com	No

### Applicant Information (Lead Site Information)

**Applicant Name:** Phoebe Physicians Group Inc - PPC of Buena Vista

**Name of Legal Entity:** Phoebe Physicians Group Inc

**Applicant FCC Registration Number:** 0021827159

**Applicant National Provider Identifier:** 1194165373

### Summary Information

**Lead Site Name:** Phoebe Physicians Group Inc - PPC of Buena Vista

**Number of Physical Sites:** 1

**Total Patient Population Served:** 9,000

### Participating Site Information

HCP Number	Site Name	Address	City	State	Zip Code	County	Non-Profit Status	Eligibility Category	Rurality Determination	Tribal Affiliation	Total Patient Population Served
70466	Phoebe Physicians Group Inc - PPC of Buena Vista	1009 GA Highway 41 N	Buena Vista	GA	31803	Marion	Non-profit	Rural health clinic	Less Rural	N/A	9000

**What is the estimated number of patients to** 1568

**Select the service areas covered by all the participating**

Georgia

**be served by the pilot project?**

**site(s) included in this application**

## Project Details

### Executive Summary

The Phoebe Putney Health System is a not-for-profit system with more than 4,500 physicians and nurses working in southwest Georgia. The following Phoebe Putney Health System sites are seeking Connected Care Pilot Funds separately but working together to improve the health of their patients: Phoebe Putney Memorial Hospital, Phoebe Primary Care & Sports Medicine of Americus, Phoebe Primary Care Americus, Phoebe Primary Care at Buena Vista, Phoebe Primary Care of Camilla, Phoebe Sumter Ellaville Clinic, Phoebe Worth Family Medicine. The combined System projects would directly benefit 6,000 high need, low-income and/or elderly patients across six counties. Connected Care Pilot funds would accelerate the usage of telemedicine to give patients better access to quality healthcare services, while minimizing the need to travel long distances. This will result in reduced travel costs for patients, improved patient outcomes, and lower costs of care.

The majority of Albany census tracts and rural Southwest Georgia score in the 50th percentile or above for adverse health outcomes and unhealthy behaviors, with diabetes, hypertension, poor mental health, high HIV rates, and cancer occurrence seeing extremely elevated prevalence compared to the rest of the country. Medicare patients makes up about 85% of Phoebe's patient base, and two-thirds of these patients have two or more chronic conditions, 36% have four or more conditions. Southwest Georgia faces endemic structural problems in dealing with healthcare due to high rates of poverty and low median income, lack of personal and public transportation, and an array of social determinants of health.

Phoebe will deploy Telehealth services for maximum optimization for our patients and healthcare providers. Phoebe will offer Telehealth and remote physiological monitoring solutions to those with high risk conditions and/or behavioral health needs. Virtual care consults will be initiated by a provider, or will allow a care consult to be initiated by the patient.

Phoebe will implement Remote Patient Monitoring (RPM) for Chronic Condition Management (CCM), Remote Patient Consultation (RPC) with primary care providers, Remote Patient Monitoring with behavioral health providers and Bedside Tele-Health monitoring for specific patient populations. Phoebe will collect and monitor the number of patients served with funds as well as health outcomes. These results can be later used to compare with patients receiving face-to-face care.

### Telehealth Experience

**Do the participating providers on this Connected Care Pilot Program application have previous experience providing telehealth services (other than electronic health records)?**

✓ Yes

**Name the health care provider or organization that you will be partnering with to provide telehealth services**

N/A

**Number of years of telehealth experience (participating sites or partner organizations)**

✓ More than 7 years

**Select the telehealth services with which the participating sites or partner organizations have experience**

✓ Patient-based Internet-Connected Remote Monitoring

✓ Imaging Diagnostics

✓ Video Visits or Consults

**Describe the services selected above and list the participating sites or partner organizations with this experience**

Phoebe Putney Health System's telehealth program includes inpatient, outpatient specialty services as well as home-based virtual visits. Telepediatrics, gastroenterology, and endocrinology telehealth services were begun in 2010. Acute telstroke and inpatient behavioral health as well as telehealth visits for their employees were added in 2016. Palliative Care, telegenetic services and sickle cell services were added in 2017 and 2018. Telehealth services are provided by Phoebe providers and through strategic partnerships with August Medical Center and Navicent Health, Augusta University Medical Center for Blood Disorders, InTouch Health, Children's Healthcare of Atlanta, Emory and Myriad. Virtual visits to the home by Phoebe Physician Group was added due to COVID-19 in March 2020. Virtual services include primary care, outpatient behavioral health, gastroenterology, oncology, rheumatology, post-op urology and pulmonology.

## **Geographic Areas and Populations**

**Select the geographic areas and populations served by the participating providers on this Connected Care Pilot Program application**

✓ A geographic area with a large underserved or low-income population. (For purposes of the Pilot Program, health care providers can determine whether a patient is considered low-income by determining whether (1) the patient is eligible for Medicaid or (2) the patient's household income is at or below 135% of the U.S. Department of Health and Human Services Federal Poverty Guidelines (FCC 20-44, para. 52))

### **Please describe**

The state of Georgia was ranked 40th in the United States for quality of healthcare according to America's Health Ranking 2019 Annual report (<https://www.americashealthrankings.org/learn/reports/2019-annual-report>). The rural communities of Southwest Georgia to be served in this project parallels (or shows worse conditions). A wide range of social factors have contributed to health inequities of Southwest Georgia – such as the lack of quality education, food insecurities (deserts), institutional discrimination, crime, poverty, housing, and access to reliable transportation. The rates of uninsured numbers in Marion County where Phoebe Primary Care Center Ellaville Clinic is 14.2% compared to the State of Georgia (13.7%), and the United States overall (9.4%).

Uninsured Rates Comparison (Source: U.S. Census Bureau, 2010)

- USA- 9.4%
- Georgia - 13.7%
- Dougherty County (Albany) – 16.7%
- Marion County (Buena Vista) – 14.2%
- Mitchell County (Camilla) – 17.7%
- Sumter County (Americus) – 12.4%
- Schley County (Ellaville) – 16.7%
- Worth County (Sylvester) – 17.5%

Telehealth will be used to help overcome this disparity. Many Phoebe Physician Group specialists are located at Phebe Putney Memorial Hospital in Albany, Georgia and patient must travel up to 60 miles to see a specialist. Assuming twice monthly visits, the cost to the patient can be over \$5,000/year. As noted above, socioeconomically these communities are at poverty levels and lack transportation generally. For those fortunate to have transportation often times cannot afford to travel to Albany, Georgia and therefore do not seek care.

The proposed implementation of RPM and Virtual Visit platform to the rural locations will help ease the financial burden and access to care limitations for patients. Telemedicine will allow primary care and specialist providers to interact with patients more effectively by using real-time information to evaluate patients' conditions.

### **Served Areas**

**The proposed pilot project will serve (check all that apply)**

☒ Department of Health and Human Services, Health Resources & Services Administration (HRSA) designated Health Professional Shortage Areas (for primary care or mental health care only). Refer to the HRSA HPSA look-up tool at: <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

**Please identify these areas**

As seen below, this area has a paucity of primary Care and Mental Health Providers in the area. Telehealth will be used to help overcome this disparity. Primary Care /Mental Health Providers Numbers Near Phoebe Primary Care Locations (Source: Robert Wood Johnson Foundation) • USA - 1,030:1 Primary Care/ 290:1 Mental Health Providers • GA– 1503:1 / 730:1 • Phoebe Primary Care Buena Vista –8,450:1/N/A • Phoebe Primary Care Camilla – 2,790:1/ 230:1 • Primary Care Americus –1,470:1/ 4,960:1 • Worth Family Medicine –3,420:1/ 10,150:1

**Would the participating providers that are included in this application and located in non-rural areas primarily serve veterans and low-income patients in rural areas? If so, list the counties where patients will be served.**

✓Yes

**Enter the percentage of the total patient population that falls into this category**

15

**Please explain and identify the rural counties**

Rural Counties include Marion, Mitchell, Sumter, Schley and Worth. Dougherty is a partially rural county.

**Patient Group**

**Would the pilot project primarily serve veterans or low-income patients?**

✓Low-Income

**Enter the estimated percentage of the total patient population served by the pilot project that may be veterans**

N/A

**Enter the estimated percentage of the total patient population served by the pilot project that may be low-income**

21

**Please explain**

N/A

**Are the participating providers on this Connected Care Pilot Program application affiliated or partnered with Veterans Affairs facilities?**

✓ No

**Please explain**

N/A

## **FCC Program**

**Have any of the health care provider sites for the proposed pilot project received or expect to receive funding from any FCC program (Telecommunications Program, Healthcare Connect Fund Program, COVID-19 Telehealth Program, etc.)?**

✓ No

**Please provide the relevant application number(s) or Funding Request Numbers and describe what the program funding was or is or will be used for and how your Pilot Program funding request differs**

N/A

## **Connected Care Services**

**The proposed pilot project will provide the following connected care service to patients (check all that apply)**

✓ Patient-based Internet-Connected Remote Monitoring

✓ Video Visits or Consults

✓ Remote Treatment

**Please describe**

A team of stakeholders selected an individualized RPM platform called MyCharlie to use with patients at home. This platform, available as a web-based or an Android or IOS application, offers a virtual care model by enabling HIPAA and HITRUST certified video conferencing. This platform allows virtual care consults initiated by a provider or by the patient. It is able to connect multiple people into the virtual care visit. In addition, screen sharing is available and other forms of communication, such as online chat features. The MyCharlie platform allows a provider to communicate to sub-groups or all group to send videos,

documents, announcements, or instructions to patients. MyCharlie collects medical grade physiological data by connecting via Bluetooth to medical peripheral devices. These devices include pulse oximeters, blood pressure cuffs, glucometers, thermometers and scales. There is also the capability for patients to hand key relevant data in the application as well.

## **Treatments**

**The proposed pilot project will treat or manage (check all that apply)**

- ✓ Chronic or long-term conditions
- ✓ Mental health conditions

**Describe the experience of participating sites or partner sites treating each condition, including the number of years treating each condition**

The Phoebe Behavioral Health has served the community for almost twenty years. It has psychiatrists and therapists available for services in the clinic and virtually. This program supports patients in the outpatient setting, or as part of step-down for patients currently in an inpatient program. Individual Therapy Services were expanded two years ago to include child and adolescents. Chronic Conditions: Diabetes: Phoebe Putney created the Diabetes Resource Center, recognized by the American Diabetes Association, almost thirty years ago to offer services to patients and their families. Heart Disease: Phoebe's launched the region's first open heart surgery program more than 30 years ago, earning distinctions for excellence in their heart and vascular program. Post-op visits, nutrition and counseling are resources that could be delivered virtually.

**Additional Information on specific conditions to be treated**

## **Goals, Objective & Implementation Plans**

**Describe the plan for implementing and operating the pilot project, including how the project intends to recruit patients and plans to provide training to providers and patients**

Multiple departments will work together to participate with the project implementation, ongoing oversight, and data analysis. Planning of protocols, processes, procedures and training materials will be a multidisciplinary as well as administrative effort incorporating clinic staff and providers from metro and rural sites. A pre-pilot was conducted in a metro clinic where many processes were trialed. This pre-pilot will serve as the framework for the pilot that is to roll



out to rural clinics. One rural clinic is to start services in early 2021. The outcomes and lessons learned in the rural setting will then be reviewed by the team and clinic members for improvement and implementation of changes before rolling out to the other clinics.

#### TEAM MEMBERS

1. Will Peterson, Vice President of Operations, oversees telehealth implementation projects.
2. Don Martin, Senior Vice President & Chief Administrative Officer, is the executive sponsor for Primary Care Telemedicine Projects.
3. Jessica Castle, Vice President of Marketing, Public Relation & Business Development, oversees marketing and promotional efforts associated with the telehealth programs and their associated offerings.
4. Karen Reyer, Phoebe Physicians Group Director, oversees billing processes associated with telehealth services delivered within outpatient settings.
5. Ross Youngdale, Phoebe Putney Health System Security and Information Systems Director, oversees technical hardware installation, network connection and security protocols associated with telehealth projects.
6. Sara Carswell, Phoebe Putney Health Systems Ambulatory Applications Manager, coordinates data integration between telehealth programs and outpatients.
7. Senior Telehealth Consultant assists in oversight of strategic project implementation and assist in the monitoring of on-going program operational efficiencies.

#### What are the goals and objectives of the proposed pilot project (check all that apply)

- ✓ Reduce patient costs
- ✓ Improve patient overall health
- ✓ Improve patient adherence to treatment plan
- ✓ Reduce health care costs for facilities and the health care system

#### Please describe

The goals for this project are to reduce patient costs, improve patient adherence to their treatment plan, and to reduce health care costs for facilities and Phoebe Putney Health System.

Phoebe Putney will measure the impact of this initiative with the following metrics:

- Increase the number of patients using telemedicine services by 5% annually over the three years
- Establish a 90+ compliance rate for primary care provider and patient interactions/ follow-ups as part of an individualized prescribed chronic condition treatment plan
- Establish a 90+% adherence to prescribed medication management for those patients with chronic conditions
- Reduce the number of unscheduled visits (ER) and hospital readmission rates for repeat ER visits of patients with chronic health conditions by 10%
- Obtain a 98% satisfaction rating from patients who participate in telemedicine visits

- Achieve a 98% satisfaction rating from primary care physicians and medical specialists who utilize telemedicine for clinical care.
- Reduction in patient travel costs, based on utilization of a virtual visit instead of in person visit

## Timeline

**What is the estimated timeline for ramping up the proposed pilot project service(s) (not to exceed 6 months from the date a funding commitment is issued)?**

✓ 3-4 Months

## Data Policy

**Describe what data will be collected and what metrics will be used to assess the project's outcomes. Also include a description of how the project will collect, track, and store such information.**

Phoebe Putney will measure the impact of this initiative and report on the following metrics:

- Increase the number of patients using telemedicine services by 5% annually over three years
- Establish a 90+% compliance rate for primary care provider and patient interactions / follow-ups as part of an individualized prescribed chronic condition treatment plan
- Establish a 90+% adherence to prescribed medication management for those patients with chronic conditions
- Reduce the number of unscheduled visits (ER) and hospital readmission rates for repeat ER visits of patients with chronic health conditions by 10%
- Implement specialty telehealth programs for Behavioral Health
- Obtain a 98% satisfaction rating from patients who participate in telemedicine visits
- Achieve a 98% satisfaction rating from primary care physicians and behavioral health providers who utilize telemedicine for clinical care

## Community Partners

**Has the project received any commitments from community partners, including physicians, hospitals, health systems, and home health/community providers to the success of the proposed pilot project?**

✓ Yes

### **Please describe**

The Phoebe Putney Health system conducted a Community Health Needs Assessment (CHNA) to identify and prioritize action plans to address the significant health problems in their service areas. The CHNA was created with the help and support of community stakeholders, health experts, and Phoebe's staff members. Key health concerns have become Phoebe Putney strategic focus areas for the next three years and include diabetes, cancer, drug use, access to behavioral health and mental health services, and low-birth rates. Virtual Visits and RPM are essential to address these issues.

Providers and staff at the respective Phoebe clinics are supportive of this initiative. The RPM platform was championed by a medical director in the Phoebe Physician group piloted in the Albany area. Eighty percent of the patients identified as benefiting from the program have agreed to participate. The success of the pilot has encouraged the rural providers to integrate it into their own practices. The biggest barrier to adoption in the rural areas is lack of adequate bandwidth to use the platform. The solution is to put a mobile router in the patient's home to connect to broadband.

### **Patient Devices or Medical Equipment**

**Describe plans for obtaining any necessary patient devices or medical equipment that will be used to provide the connected care services for the proposed pilot project**

A) Remote Patient Monitoring for Complete Care Management (CCM)/ Primary Care Provider (PCP) : Phoebe will deploy devices necessary to enable the provision of telehealth services for those in the Complex Care Management Program. Each program enrollee will have a version of the MyCharlie Application downloaded to their smartphone. For those without a smartphone, a 10-inch Samsung tablet equipped with cellular data capabilities will be provided. In addition, each patient will receive a suite of blue tooth enabled medical peripheral devices tailored to their individual clinical pathway. These Bluetooth enabled RPM devices, connected to MyCharlie, include pulse oximeters, blood pressure cuffs, glucometers, thermometers and scales. In addition, those with diabetes who are given a glucometer, will also receive the associated supplies.

B) Remote Patient Monitoring for Behavioral Health: Each behavioral health practitioner will be set up for the telehealth module and each program enrollee will have a version of the MyCharlie Application downloaded to their smartphone.

### **Self-Sustainability**

**Explain how the pilot project might be self-sustaining once established**

This project is a core part of strategic planning efforts again underway at Phoebe Putney Health System in recognizing investments in telehealth capabilities will be required. This planning was set back due to losses due to COVID-19, but Grant funding would immediately assist the rapid implementation of technology and virtual services clearly needed in these communities. Benefits of decreased ER utilization and hospital readmission rates as well as some reimbursement from government and private payers will contribute to sustainability. Phoebe leadership is committed to long-term financial support for Telehealth in their communities and is partnering with Blue Cirrus Consulting, LLC to develop business and strategic models that will build capabilities that are sustainable and systems that are able to respond to a rapidly changing environment.

## **Funding Requirements**

**Is this Connected Care Pilot Project application requesting funding for network equipment?**

✓ No

**Is this Connected Care Pilot Project application requesting connectivity services for participating health care providers?**

✓ No

**Is this Connected Care Pilot Project application requesting funding for patient broadband?**

✓ Yes

**Estimate of Percentage of pilot project patient population that lacks adequate broadband for connected care services**

80

**How will this pilot project assess whether a patient lacks broadband service or has broadband Internet access service insufficient for the indicated connected care service based on speed, technology, or data cap limitations?**

In the pre-pilot, part of intake information gathering was to ask the patient what network services they had. For the pilot, Phoebe will work with the technology vendor to develop guidelines and to supply training for the clinic staff to test the patient's broadband capability prior to dispatching the equipment. The effectiveness of the testing and patient satisfaction with the process will be noted and changes made as needed.

**Technology**

✓ Mobile

**Minimum speed necessary for pilot project**

**Download**

N/A

**Upload**

N/A

**Minimum mobile technology required for pilot project**

N/A

**Please Describe**

N/A

**Provide the estimated number of broadband connections that the health care provider intends to purchase to provide connected care services to patients who lack broadband service or have insufficient broadband services:**

100

**Is this Connected Care Pilot Project application requesting funding for an information service, other than broadband connectivity, that you will use to provide connected care services?**

✓ No

**Describe the service**

N/A

**Does the service facilitate capturing, transmitting, or storage of data for connected care?**

N/A

**Describe why it is integral to your pilot project**

N/A

## **Funding**

**Year One**

Item	Category of Eligible Expense	Description of Expense	Quantity of Items	Expense Frequency	Quantity of Expense Periods	Cost per Item per Expense Period/ Unit Cost	Total Cost
Access	Patient broadband internet access services	Patient access	100	Monthly	9	40	\$36,000.00

### Year Two

Item	Category of Eligible Expense	Description of Expense	Quantity of Items	Expense Frequency	Quantity of Expense Periods	Cost per Item per Expense Period/ Unit Cost	Total Cost
Access	Patient broadband internet access services	Patient access	100	Monthly	12	40	\$48,000.00

### Year Three

Item	Category of Eligible Expense	Description of Expense	Quantity of Items	Expense Frequency	Quantity of Expense Periods	Cost per Item per Expense Period/ Unit Cost	Total Cost
Access	Patient broadband internet access services	Patient access	100	Monthly	12	40	\$48,000.00

**Total Funding Request**

Year	Total	Total @ 85%
1	\$36,000.00	\$30,600.00
2	\$48,000.00	\$40,800.00
3	\$48,000.00	\$40,800.00
Total	\$132,000.00	\$112,200.00

**Estimated Funding Request Total: \$112,200.00**

**Estimated Applicant Share of Cost for Eligible Items: \$19,800.00**

**Estimated Cost of Ineligible Items: \$115,491.00**

**Total Estimated Pilot Project Cost: \$247,491.00**

**Please select all anticipated sources of financial support for the applicant's share of cost for eligible items**

- ✓ Eligible HCP participant
- ✓ State grants, funding, or appropriations
- ✓ Federal funding, grants, loans, or appropriations
- ✓ Individual patients

**What is the plan to cover the cost of ineligible items?**

Phoebe Putney will supply the initial tablet and peripheral devices as well as the yearly subscription needed for MyCharlie virtual visits and RPM platform.

Other funding, including state grants, federal grants, and private grants will be sought to further help with funding the program. It is anticipated that improved management of chronic disease will result in reduced ED visits. The savings to the system will help cover the costs of the ineligible items.

## Documentation

By checking this box, Applicants request confidential treatment under the Commission's rules, 47 CFR § 0.459, for one or more of the attachments. Only those portions of an attachment that actually contain confidential information may be designated as confidential. All information for which confidential treatment is requested must be specifically identified, for example, by highlighting or setting off the information with brackets. The attachment containing the confidential information must be marked "CONFIDENTIAL" in the file name and, where feasible, in a page header. Where only a portion of a document contains confidential information, a public version of the document, with the confidential information redacted from it, must also be submitted.

Request confidential treatment: **Yes**

### Documents

Document Name	Document Type	Uploaded By	Updated Date/Time
CHNA_PSMC2020(Sumter)	General	Roderick Gilbert	12/7/2020 3:34 PM
PPHS_FY18Form990	Financial Health	Roderick Gilbert	12/7/2020 2:30 PM

Applicants may request a waiver of FCC rules to participate in the Connected Care Pilot. When requesting a waiver, additional documentation must be included detailing the need for such a waiver (these attached materials will not be withheld from public inspection pursuant to the procedures set forth in section 0.459 of the Commission's rules). Does the project need a waiver of any applicable FCC rules to participate in the Pilot Program?

✓ **No**

**Please identify the rules you wish to have waived**

N/A

### Certification

✓ I certify, under penalty of perjury, that I am authorized to submit this application on behalf of the health care provider(s) listed in the application.

✓ I certify, under penalty of perjury, that to the best of my knowledge, information, and belief, all information contained in this application, and in any attachments, is true and correct.

✓ I certify and acknowledge, under penalty of perjury, that if selected, the health care provider(s) in the application will comply with all applicable Connected Care Pilot Program rules, requirements and procedures, including the requirement to pay 15% of the costs for supported items from eligible sources, and all applicable federal and state laws, including the Americans with Disabilities Act, th

✓ I certify and acknowledge, under penalty of perjury, that if selected, the health care providers in the application will comply with the applicable Health Insurance Portability and Accountability Act (HIPAA) requirements and other applicable privacy and reimbursement laws and regulations, and applicable medical licensing laws.



✓ I certify and acknowledge, under penalty of perjury, that all documentation associated with this application must be retained for a period of at least five years after the conclusion of the participating pilot project to demonstrate compliance with the Connected Care Pilot Program rules, requirements and procedures, subject to audit.

✓ I certify, under penalty of perjury, to the best of my knowledge, that the health care provider(s) listed in the application is not already receiving or expecting to receive other funding (from any source, private, state, or federal) for the exact same services and/or equipment eligible for support under the Connected Care Pilot Program.

✓ I certify and acknowledge, under penalty of perjury, that all requested equipment and services funded under the Connected Care Pilot Program will be used for their intended purposes.

## Signature and Date

**Certifier's Full Name:** Ross Youngdale

**Certifier's Signature:** Ross Youngdale

**Date:** 12/7/2020